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152

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/805,023	03/18/2004	Hirokazu Ikeda	16869K-111100US

20350
TOWNSEND AND TOWNSEND AND CREW, LLP
TWO EMBARCADERO CENTER
EIGHTH FLOOR
SAN FRANCISCO, CA 94111-3834

CONFIRMATION NO. 9205
FORMALITIES LETTER



OC000000012851799

Date Mailed: 06/03/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$130** for a Large Entity

- **\$130** Late oath or declaration Surcharge.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents

08/06/2004 FFANAI2 00000017 201430 1080502 P.O. Box 1450
01 FC:1051 130.00 DA Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

B. To

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



PTO/SB/21 (04-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/805,023
Filing Date	March 18, 2004
First Named Inventor	Ikeda, Hirokazu
Art Unit	
Examiner Name	
Attorney Docket Number	16869K-111100US

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement

<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application

<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund

<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
1. Declaration/Power of Attorney
2. Copy of Notice
3. Supplemental ADS
4. Assignment Papers
5. Return Postcard |
|---|--|---|
- Remarks** The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Pursuant to the Notice to File Missing Parts of Nonprovisional Application, dated June 3, 2004, the enclosures listed on this sheet are to be made of record in the above-identified case.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP	Reg. No. 27,431
Signature		
Date	7/20/04	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name Roger Hylton

Signature

Date

8/2/04

**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 170

Complete if Known

Application Number	10/805,023
Filing Date	March 18, 2004
First Named Inventor	Ikeda, Hirokazu
Examiner Name	
Art Unit	
Attorney Docket No.	16869K-111100US

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																							
<input checked="" type="checkbox"/> Deposit Account:																									
Deposit Account Number: 20-1430																									
Deposit Account Name: Townsend and Townsend and Crew LLP																									
The Director is authorized to: (check all that apply)																									
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FEE CALCULATION																									
1. BASIC FILING FEE																									
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																									
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Other fee (specify) _____																									
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$170)																							

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Robert C. Colwell	Registration No. (Attorney/Agent)	27,431
Signature		Telephone	650-326-2400
		Date	7/30/04

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